

INFORMATION FOR DEALERS IN NURSERY STOCK

Dealer Defined: By a dealer is meant any person or firm not a grower of nursery stock who buys nursery stock for the purpose of reselling it.

1. FEES:

LICENSE FEE & INSPECTION FEE: Level I: 0-5,000 sq. feet heelyard area \$150.00
 Level II:
 5,001 -15,000 sq. feet heelyard area \$300.00
 Level III:
 over 15,000 sq. feet heelyard area \$450.00

NURSERY CERTIFICATE TAGS:
 15¢ each.

2. EXPIRATION DATE: October 31 following date of issue.

3. FACILITIES: Dealers must provide facilities for keeping nursery stock in viable condition, either outdoors or indoors, and inspector will check for these facilities, as well as for infestations of insect pests, plant diseases and noxious weeds.

4. CANCELLATION OF LICENSE: License may be canceled at any time for the following reasons:
 (1) Repeated substitution by the licensee of varieties or kinds of nursery stock other than those ordered, except by consent of purchases; (2) Misrepresentations such as making false statements or promises for the purpose of making a sale; (3) Repeated sales of poor quality, unthrifty, diseased or insect-infested nursery stock; (4) Failure to fulfill commitments covered by contracts, or neglecting to make adjustments or replacements on nursery stock as by prior agreement; (5) Violation of any of the provisions of this Act, or of the provisions of the Plant Act of 1917 or its regulations. (Ark. Statutes 1947)

I hereby apply for a Nursery Dealer's License and agree, if same is issued, that I will not deal in any nursery stock unless the grower of such stock holds a valid inspection certificate.

DO YOU HAVE A HEELYARD OR DISPLAY AREA
 WHERE PLANTS MAY BE INSPECTED _____?

YES/NO

Choose Appropriate Level	Fees
Level I License Fee \$150.00 (Minimum)	\$ _____
Level II \$300.00	\$ _____
Level III \$450.00	\$ _____
____ Nursery Certificate Tags (Minimum Order of 20)	\$ _____
Total	\$ _____

Name of Business _____
 (Please Print Your Name of Business)

Complete Address _____
 (Please Print Your Complete Address)
 _____ Zip Code _____

Date _____ By _____
 (Please Print Your Name)

Telephone Number _____